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## BIB DATA SHEET

CONFIRMATION NO. 1259

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/668,077	09/22/2003 RULE	623	3738	ACS 63118 (3624X)	
<b>APPLICANTS</b> K.T. Venkateswara Rao, San Jose, CA; <b>** CONTINUING DATA *****</b> This application is a CIP of 10/293,108 11/13/2002 PAT 7,144,422 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/15/2003					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /BRUCE EDWARD SNOW/ Acknowledged _____ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 8	<b>TOTAL CLAIMS</b> 25	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> CAMERON KERRIGAN SQUIRE, SANDERS & DEMPSEY L.L.P. ONE MARITIME PLAZA SUITE 300 SAN FRANCISCO, CA 94111-3492 UNITED STATES					
<b>TITLE</b> Drug-eluting stent and methods of making					
<b>FILING FEE RECEIVED</b> 1342	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		